L1800 292 828

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	<u></u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



900335824709

10/17/19--01008--002 ++25.00



Y SULKER NOV 05 2019

COVER LETTER

TO:	Registration S Division of Co			
SUD IEZ	Rick Color	n LLC		
SUBJEC	. I:	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Rick A. Colon Jr		
			Name of Person	
		Rick Colon LLC		
			Firm/Company	
		884 Summerfield Dr		
			Address	
		Lakeland, FL 33803		
			City/State and Zip Code	
		rcolon293@hotmail.com		
For furth	er information c	E-mail address: (concerning this matter, please c	to be used for future annual report notifial:	ication)
Rick Co			813 239-4010 at ()	
	Name o	of Person		: Telephone Number
Enclosed	is a check for t	he following amount:		
\$ 25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rick Colon LLC			
(Name of the Limite	d Liability Compa A Florida Limited	iny as it now appears on our l Liability Company)	records.)
The Articles of Organization for this Limited Lia Florida document number L18000292828	ability Company	were filed on 12/21/2018	and assigned
This amendment is submitted to amend the follo-	wing:		
A. If amending name, enter the new name of	t <u>he limited liab</u>	ility company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	Rick A. Colon Jr	
Principal office address MUST BE A STREET	ADDRESS)	884 Summerfield Dr.	
	· · · · · · · · · · · · · · · · · · ·	Lakeland, FL 33803	
Enter new mailing address, if applicable:		Rick A Colon Jr	
(Mailing address MAY BE A POST OFFICE BOX)		884 Summerfield Dr.	201
		Lakeland, FL 33803	in a m
B. If amending the registered agent and/o registered agent and/or the new registered off			cords, enter the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	884 3	ummerhield Dr. Enter Florida street	address
	Lakeland		_, Florida
		Cin	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	Name	Address	Type of Action
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			
			☐ Remove
			□ Change
			D Add
			□ Remove
			☐ Change
		 -	
			□ Remove
			☐ Change
			
			☐ Remove
			Change

	·	
-		
Effective date, if other than the	e date of filing:	(optional)
(If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the D	lock does not meet the applic	r to date of filing or more than 90 days after filing.) Pursuant to 605.0207 cable statutory filing requirements, this date will not be listed as i.
the record specifies a delayed) The 90th day after the rec		ot an effective time, at 12:01 a.m. on the earlier of
October 14th	2019	
11/2		 -
(/ (/) ()		norized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00